## Supplementary file 1

## Table S1. Irritable Bowel Syndrome (IBS) Questionnaire

How often did this discomfort or pain get better or stop after you had a bowel movement?

When this discomfort or pain started, did you have more frequent bowel movements?

When this discomfort or pain started, did you have less frequent bowel movements?

When this discomfort or pain started, were your stools (bowel movements) looser?

When this discomfort or pain started, how often did you have harder stools?

In the last 3 months, how often did you have hard or lumpy stools?

In the last 3 months, how often did you have loose, mushy or watery stools?

In the last 3 months, how often did you feel that you had to rush to the bathroom as soon as you got the urge to have a bowel movement?

In the last 3 months, how often did you feel bloated?

In the last 3 months, how often did you feel that your abdomen/belly was actually distended?

In the last 3 months, how often did you feel that you had a problem with passing too much gas?